

Adult Family Home Disclosure of Services Required by RCW 70.128.280

HOME / PROVIDER Bruce Loyd	LICENSE NUMBER 752752
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NOTE: The term "the home" refers to the adult family home / provider listed above.

The scope of care, services, and activities listed on this form may not reflect all required care and services the home must provide. The home may not be able to provide services beyond those disclosed on this form, unless the needs can be met through "reasonable accommodations." The home may also need to reduce the level of care they are able to provide based on the needs of the residents already in the home. For more information on reasonable accommodations and the regulations for adult family homes, see [Chapter 388-76](#) of Washington Administrative Code.

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About the Home	
1. PROVIDERS STATEMENT (OPTIONAL) The optional provider's statement is free text description of the mission, values, and/or other distinct attributes of the home. NW Health and Wellness AFH. Keeping seniors active and healthy through mind, body and soul throughout the rest of their life. NW Health and Wellness is committed to improving the physical, emotional, and spiritual health of all individuals we serve and to enhance the quality of life through nature, body movement and nutrition. NW Health and Wellness is designed to preserve and support the older adults with dignity and respect. We serve to provide care with excellence and compassion.	
2. INITIAL LICENSING DATE 11/06/2014	3. OTHER ADDRESS OR ADDRESSES WHERE PROVIDER HAS BEEN LICENSED:
4. SAME ADDRESS PREVIOUSLY LICENSED AS:	
5. OWNERSHIP <input type="checkbox"/> Sole proprietor <input checked="" type="checkbox"/> Limited Liability Corporation <input type="checkbox"/> Co-owned by: <input type="checkbox"/> Other:	

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Personal Care

"Personal care services" means both physical assistance and/or prompting and supervising the performance of direct personal care tasks as determined by the resident's needs, and does not include assistance with tasks performed by a licensed health professional. (WAC 388-76-10000)

1. EATING

If needed, the home may provide assistance with eating as follows:

Cueing and Hands on assistance if needed

2. TOILETING

If needed, the home may provide assistance with toileting as follows:

Total incontinent care available.

3. WALKING

If needed, the home may provide assistance with walking as follows:

Stand by and Hands on assistance.

4. TRANSFERRING

If needed, the home may provide assistance with transferring as follows:

All transfers are available by hands on assistance as needed.

5. POSITIONING

If needed, the home may provide assistance with positioning as follows:

Trained staff is on site for all home care needs such as positioning every two hours.

6. PERSONAL HYGIENE

If needed, the home may provide assistance with personal hygiene as follows:

All trained staff available for all hygiene tasks such as bathing, toileting, application of lotion, and denture care

7. DRESSING

If needed, the home may provide assistance with dressing as follows:

Trained staff available to assist with total assistances and cueing

8. BATHING

If needed, the home may provide assistance with bathing as follows:

Trained staff available to assist with bed bath or walk in shower with wheelchair access

9. ADDITIONAL COMMENTS REGARDING PERSONAL CARE

Personal Care is provided seven days a week twenty four hours a day for all personal care needs.

Medication Services

If the home admits residents who need medication assistance or medication administration services by a legally authorized person, the home must have systems in place to ensure the services provided meet the medication needs of each resident and meet all laws and rules relating to medications. (WAC 388-76-10430)

The type and amount of medication assistance provided by the home is:

Reliant RX pharmacy is in place. Providers are certified through Empowering People for all delegated tasks if needed.

ADDITIONAL COMMENTS REGARDING MEDICATION SERVICES

Reliant RX is are Pharmacy of choice. Other pharmacies are available if needed.

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Skilled Nursing Services and Nurse Delegation

If the home identifies that a resident has a need for nursing care and the home is not able to provide the care per chapter 18.79 RCW, the home must contract with a nurse currently licensed in the state of Washington to provide the nursing care and service, or hire or contract with a nurse to provide nurse delegation. (WAC 388-76-10405)

The home provides the following skilled nursing services:

Gentiva or Mobile Medical.

The home has the ability to provide the following skilled nursing services by delegation:

All delegated services are available through Empowering People.

ADDITIONAL COMMENTS REGARDING SKILLED NURSING SERVICE AND NURSING DELEGATION

We will use skilled nursing services as needed.

Specialty Care Designations

We have completed DSHS approved training for the following specialty care designations:

- ☐ Developmental disabilities
- ☒ Mental illness
- ☒ Dementia

ADDITIONAL COMMENTS REGARDING SPECIALTY CARE DESIGNATIONS

Highly trained and skilled for both illnesses.

Staffing

The home's provider or entity representative must live in the home, or employ or have a contract with a resident manager who lives in the home and is responsible for the care and services of each resident at all times. The provider, entity representative, or resident manager is exempt from the requirement to live in the home if the home has 24-hour staffing coverage and a staff person who can make needed decisions is always present in the home. (WAC 388-76-10040)

- ☒ The provider lives in the home.
- ☐ A resident manager lives in the home and is responsible for the care and services of each resident at all times.
- ☐ The provider, entity representative, or resident manager does not live in the home but the home has 24-hour staffing coverage, and a staff person who can make needed decisions is always present in the home.

The normal staffing levels for the home are:

- ☐ Registered nurse, days and times: As needed through skilled nursing services.
- ☐ Licensed practical nurse, days and times: As needed through skilled nursing services.
- ☒ Certified nursing assistant or long term care workers, days and times: 24/7
- ☒ Awake staff at night
- ☐ Other:

ADDITIONAL COMMENTS REGARDING STAFFING

2 to 3 staff members at all times.

Cultural or Language Access

The home must serve meals that accommodate cultural and ethnic backgrounds (388-76-10415) and provide informational materials in a language understood by residents and prospective residents (Chapter 388-76 various sections)

The home is particularly focused on residents with the following background and/or languages:

English and Spanish

ADDITIONAL COMMENTS REGARDING CULTURAL OR LANGUAGE ACCESS

One HCA is from Columbia. Speaks fluent spanish.

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Medicaid

The home must fully disclose the home's policy on accepting Medicaid payments. The policy must clearly state the circumstances under which the home provides care for Medicaid eligible residents and for residents who become eligible for Medicaid after admission. (WAC 388-76-10522)

☐ The home is a private pay facility and does not accept Medicaid payments.

☒ The home will accept Medicaid payments under the following conditions:

Minimum three years of private pay before Medicaid is accepted. (negotiable)

ADDITIONAL COMMENTS REGARDING MEDICAID

Activities

The home must provide each resident with a list of activities customarily available in the home or arranged for by the home (WAC 388-76-10530).

The home provides the following:

Activities depend on residents abilities. Games, crafts, country and other senic drives, raised gardening beds, shopping, doctor appt. Music, movies, exercise sessions and massage for circulation

ADDITIONAL COMMENTS REGARDING ACTIVITIES

What ever is desired by residents is the activity we will provide.

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